opfication or Docket Number														
PATENT APPLICATION SEE DETERMINATION RECOR Effective October 1, 2001									" 10/089327					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY	OR	OTHER SMALL			
TOTAL CLAIMS								TYPE C	FEE	וריין	RATE	FEE	l	
FOR			NUMBER FILED NUMBER EXTRA					BASIC FEE	370.00	CB	BASIC FEE	46.60		
TOTAL CHARGEABLE CLAIMS			// minus 20= • —					X\$ 9=	 -	1	X\$i8=			
INDEPENDENT CLAIMS			# minus 3 = * /				X42=		OR	X84=	8 84			
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=	<u> </u>	OR	+280=	01		
• 11	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR				
Who CLAIMS AS AMENDED - PART II								SMALL	ENTITY	OR	OTHER			
AMENDMENTA .	SAVORT /	(Column 1) CLAIMS	di San Ci	(Colu	EST	(Column 3)	}	SINALL	ADDI-		SMALL	ADDI-	ł	
		REMAINING AFTER AMENDMENT	एक जिल	PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL		
	Total	.6	Minus	/		2		X\$ 9=		OR	X\$18=	,		
	Independent	· 2	Minus 2	***	<u>/</u>	9/		X42=		OR	X84≈			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280≠	,		
10/0/								TOTAL			TOTAL			
V	11310	Column 1)		(Colu	mn 21	(Column 3)		ADDIT. FEE		JON .	addit. Fée			
AMENOMENT B		CLAIMS REMAINING		HIGH NUMI	EST	PRESENT			ADDI-		·	ADDI-		
		AFTER AMENDMENT		PREVI		EXTRA		RATE	TIONAL _FEE		RATE	TIONAL FEE		
	Total	· 9	Minus	-0	0	·		X\$ 9=		OR	X\$18=		-	
	Independent	NTATION OF MIL	Minus	+++ 4	7 C C1 0114	-		X42=		OR	X84=			
_	FINOT FREDE	,	DETIFIE DEF	CHUCH	COMM		,	+140=		OR	+280=			
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		l	
		(Column 1)	·	(Colui	mn 2)	(Column 3)		ADD11: 7 EE 1			ADDII. FEE			
AMENDMENT C	2007 200 Z	CLAIMS REMAINING	enius.	HIGH	EST	PRESENT	1		ADDI-	1		ADDI-		
	· 	AFTER AMENDMENT		PREVIO		EXTRA		RATE	TIONAL FEE		RATE	TIONAL		
	Total	4	Minus	**				X\$ 9=		OR	X\$18=			
	Independent	•	Minus	***		3		X42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]							
* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.									OR	+280=				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE														
		ber Previously Pai					er fau	ind in the app	ropriate box	in col	umn 1.			